Case 19-32739-RG Doc 46 Filed 04/09/20 Entered 04/09/20 14:58:14 Desc Main Document Page 1 of 2

Fill	in this information to identify your c	ase.				ı				
	otor 1 John Cosard									
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW J	ERSEY		_					
Cas	se number 19-32739					Chec	k if this is:			
(If known)			□				n amende	ed filing		
									g postpetition ollowing date:	
0	fficial Form 106I					M	IM / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment Fill in your employment	r spouse is not filing w	ith you, do not inclu onal pages, write yo	ıde infor	mati	on about	your spo umber (if	ouse. If mo known). A	ore space is inswer every	needed,
	information.		Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed □ Not employed				☐ Employed ☐ Not employed			
		Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name	Nestor Imports	s, INC						
	Occupation may include student or homemaker, if it applies.	Employer's address	8403 7th Ave Brooklyn, NY 11228							
		How long employed t	here?				_			
Par	t 2: Give Details About Mor	nthly Income								
spou If yo	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have more space, attach a separate sheet to	ore than one employer, co	,	•		·		·	·	J
						For Deb	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, salary, and commissions (be deductions). If not paid monthly, calculate what the monthly			2.	\$	2,	,306.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,30	06.00	\$	N/A	

Deb	btor 1 John Cosares			Case	e number (if known)	19-32739	
				Fo	r Debtor 1	For Debto	
	Copy line 4 here		4.	\$_	2,306.00	\$	N/A
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social	Security deductions	5a.	\$	33.46	\$	N/A
	5b. Mandatory contributions f	or retirement plans	5b.	\$	0.00	\$	N/A
	5c. Voluntary contributions for	r retirement plans	5c.	\$	0.00	\$	N/A
	5d. Required repayments of re	etirement fund loans	5d.	· -	0.00	\$	N/A
	5e. Insurance		5e.	, ,	0.00	\$	N/A
	5f. Domestic support obligati	ons	5f.	\$_	0.00	\$	N/A
	5g. Union dues	Otata Tau NJ	5g.	_	0.00		N/A
	5h. Other deductions. Specify:	State Tax NJ	5h.	+ \$ ₋		+ \$	N/A
_	Fed OASDI			· –	143.06	\$	N/A
6.		d lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	211.90	\$	N/A
7.	Calculate total monthly take-hor	ne pay. Subtract line 6 from line 4.	7.	\$_	2,094.10	\$	N/A
8.	profession, or farm Attach a statement for each receipts, ordinary and neces	property and from operating a business, property and business showing gross property business expenses, and the total					
	monthly net income. 8b. Interest and dividends		8a. 8b.		0.00	\$ \$	N/A
	8c. Family support payments regularly receive Include alimony, spousal su settlement, and property set		e nt 8c.	\$_	0.00	\$	N/A N/A
	8d. Unemployment compensa	tion	8d.	. –	0.00	\$	N/A
	8e. Social Security		8e.	\$_	2,288.00	\$	N/A
	Include cash assistance and	nce that you regularly receive If the value (if known) of any non-cash assistant and stamps (benefits under the Supplemental and or housing subsidies.	nce 8f.	\$	0.00	\$	N/A
	8g. Pension or retirement inco	ome	8g.	\$	0.00	\$	N/A
	8h. Other monthly income. Sp	ecify: Rental Income	8h.	+ \$	2,200.00	+ \$	N/A
	Contribution			\$_	3,600.00	\$	N/A
9.	Add all other income. Add lines	8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	6,988.00	\$	N/A
10.	. Calculate monthly income. Add	line 7 + line 9.	10.	5	10,182.10 + \$	N/A	A = \$ 10,182.10
	Add the entries in line 10 for Debto	or 1 and Debtor 2 or non-filing spouse.					
11.	Include contributions from an unmother friends or relatives.	ons to the expenses that you list in Scheduarried partner, members of your household, you included in lines 2-10 or amounts that are not	our depei		•	ted in <i>Schedu</i>	ule J. . +\$ 0.00
12.		nn of line 10 to the amount in line 11. The repair of Schedules and Statistical Summary of Cer					
							Combined monthly income
13.	Do you expect an increase or de No. Yes. Explain:	crease within the year after you file this for	rm?				